Jersey Care Commission

INSPECTION REPORT

Les Hoûmets Care Home

Care Home Service

Gorey Village
Grouville
JE3 9EP

Inspection Dates
23 and 25 June
1 July 2026

Date Published
22 July 2026

1. THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014 ('the Law'), all services carrying out any regulated activity must be registered with the Jersey Care Commission ('the Commission').

This inspection was carried out in accordance with Regulation 80 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 to monitor compliance with the Law and Regulations, to review and evaluate the effectiveness of the regulated activity and to encourage improvement.

2. ABOUT THE SERVICE

This is a report of the inspection of Les Hoûmets Care Home. The care home is operated by Les Hoûmets Care Home Ltd and there is a registered manager in place.

Registration Details	Detail
Type of regulated activity	Care Home
Mandatory Conditions of Registration	
Category of care	Adult 60+
Maximum number of care receivers	28
Age range of care receivers	60 years and above
Maximum number of care receivers that can be accommodated in each room	Rooms 1 – 28 one person
Discretionary Conditions of Registration	
There are none	
Additional information	
The home has submitted information to the Commission in line with regulatory requirements since the last inspection.	

As part of the inspection process, the Regulation Officer evaluated the home's compliance with the mandatory conditions of registration required under the Law. The Regulation Officer concluded that all requirements have been met.

3. ABOUT THE INSPECTION

3.1 Inspection Details

This inspection was carried out over three separate visits. The first visit was unannounced to observe the home's operation in its usual, day to day context. The second visit was announced to allow for follow up enquiries, review of documentation and engagement with care staff who predominantly work nightshifts. The third visit was pre-arranged to meet with the home's Senior Manager who is responsible for governance and quality monitoring, and to review a sample of care records.

Inspection information	Detail
Dates and times of this inspection	23 June 2026 1pm – 5.30pm 25 June 2026 3pm – 8.15pm 1 July 2026 8.20am – 10:15am
Number of areas for improvement from this inspection	None
Number of care receivers accommodated on the day of the inspection	25
Date of previous inspection	2 and 7 July 2026
Areas for improvement noted at the last inspection	None
Link to the previous inspection report	RPT_LHT_Inspection_20250707.pdf

3.2 Focus for this inspection

This inspection included a focus on these specific lines of enquiry:

- **Is the service safe**
- **Is the service effective and responsive**
- **Is the service caring**
- **Is the service well-led**

4. SUMMARY OF INSPECTION FINDINGS

4.1 Progress against areas for improvement identified at the last inspection

At the last inspection, no areas for improvement were identified.

4.2 Observations and overall findings from this inspection

The findings from this inspection show that the home continues to consistently meet the Standards, as identified on previous inspections. This marks the third consecutive year in which no areas for improvement have been found. Care receivers and their families consistently regard the home as a brilliant place to live and commented on the quality of care provided. They described a homely, warm, uplifting environment where care receivers are cared for in line with their personal preferences, interests and wishes. Everyone commented positively on the approach to care, highlighting how it is tailored to meet individual needs.

Care receivers and relatives consistently highlighted the home's village location as a key strength, commenting that it enabled care receivers to remain connected to the community, helping them feel included and valued in local life. Relatives constantly expressed confidence that their loved ones were safe, well cared for, and protected from social isolation.

The leadership and management arrangements consistently lead to positive experiences for care receivers and an open and transparent culture is promoted. This positive culture contributes to continuity of care and promotes strong professional relationships between staff, care receivers and their families. Staffing levels match planned rotas, and staff feel valued and are happy working in the home.

New staff are recruited safely and are supported to develop competence and confidence in their roles

Since the last inspection, the Provider has invested in the staff team and demonstrated a commitment to the ongoing development of the home.

There are no areas for improvement resulting from this inspection. The home continues to operate in a way that promotes the wellbeing, safety, and quality of life of care receivers.

5. INSPECTION PROCESS

5.1 How the inspection was undertaken

The Care and Support Services with Accommodation Standards were referenced throughout the inspection.[1]

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report, the Statement of Purpose, and notification of incidents.

The Regulation Officer gathered feedback from six care receivers and five of their representatives. They also had discussions with the service's management and other staff. Feedback was requested from five health professionals external to the service, although no responses were received.

As part of the inspection process, documents including policies, care records, medication records, staff folders, menus, governance reports, incident and accident reports, training records and duty rotas were examined.

At the conclusion of the inspection visit, the Regulation Officer provided verbal feedback to the Registered Manager. A summary of the inspection findings was provided by email to both the Registered Manager and the Provider on 29 July 2026.

This report presents our findings from the inspection and outlines the range of observations made. Throughout the report, we may highlight any areas of good practice identified, along with suggestions where practice could be strengthened or further enhanced.

[1] All Care Standards can be accessed on the Commission's website at https://carecommission.je/

5.2 Sources of evidence

Key lines of enquiry	
Focus	**Evidence Reviewed**
Is the service safe	Walk around the home Fire safety records Personal emergency evacuation plans (PEEP) Samples of medication administration records (MAR) Medication policy Discussion about medication practices with a member of staff Domestic rotas Care staff rotas Staff recruitment records Samples of training and qualification certificates
Is the service effective and responsive	Samples of care records Risk assessments Resident satisfaction surveys Written agreements Samples of care fee invoices Records with external health professionals
Is the service caring	Regulation Officer observations made during the inspection visits Menu samples Discussions with care receivers and their representatives Review of some bedrooms
Is the service well-led	Discussions with the Registered Manager, staff, Provider and Senior Manager Samples of monthly governance reports Training records Business continuity plan Appraisal, supervision and probationary review records

6. INSPECTION FINDINGS

Is the service safe?

People are protected from abuse and avoidable harm.

The safety of care receivers is a key priority within the home. On each of the three visits to the home, the main entrance door always remained secured and was promptly answered by staff. During the inspection, visitors were observed entering the home and being welcomed by staff. This process not only ensured that staff were aware of who was entering and leaving the building but also created valuable opportunities for informal communication with relatives and friends. The way visitors were greeted contributed positively to the homely environment, with two relatives specifically commenting on the approach to both security and family engagement.

The fire safety records were reviewed which showed that all required checks set by the Fire and Rescue Service are completed in line with the expected timeframes. The Provider has also enhanced fire safety training for staff by commissioning additional external training on fire safety evacuation procedures and emergency response. Additional emergency equipment has been purchased to be used in the event of a fire or other emergency. The Registered Manager described that staff were actively applying their learning in practice, and had been identifying risks promptly, and understanding evacuation procedures. It is intended that horizontal evacuation procedures will be tested out, and signs placed on the back of bedroom doors to identify the correct direction of evacuation during an emergency.

The Provider is also continuing to liaise with the Fire and Rescue Service regarding implementing further building safety precautions. These actions show the safety and well-being of care receivers is a clear priority and reflects the home's commitment to continuous improvement.

Samples of medication administration records (MAR) and the controlled drug register were reviewed on the first day of inspection, which showed that the records had all been appropriately completed and reflective of safe medication practices.

The Regulation Officer had a lengthy discussion with one of the members of staff responsible for medication administration, who relayed a detailed and thorough understanding of medication procedures, storage requirements, record keeping and safe administration practices. The staff member was knowledgeable and able to explain processes clearly and confidently which gave an assurance that medication management arrangements meet the required Standards. Certificates reviewed during the inspection confirmed that all staff members who administer medication have completed the training and competency checks required by the Standards.

In addition to completing the medication training required by the Standards, staff had received accredited external refresher training earlier in the year to further enhance their knowledge and understanding of safe medication management. The training included individual competency assessments to evaluate and verify practice, reflecting an example of good practice regarding the competence of staff administering medication.

The medication policy was also reviewed and was generally comprehensive; however, some areas were identified where further detail and strengthening was required. This was discussed during the inspection, and it was acknowledged that, following the policy's revision in May 2026, some information contained within the previous version had been unintentionally omitted. The Senior Manager recognised this oversight and confirmed that the policy would be reviewed to ensure all relevant procedures are fully documented.

Samples of domestic and care staff rosters were reviewed and found to be fully auditable, clearly showing the shifts rostered, clock in and clock out time, and staff working hours. Staffing levels were effectively monitored and consistently met the Standards.

During the inspection visits, which included early morning and evening hours, staff were observed to have adequate time to provide person centred care and support. Staff did not appear rushed in carrying out their duties and were observed spending time with care receivers, including sitting and chatting with them, which showed that the staffing levels not only meet the Standards, but are appropriate to meet their needs.

As part of the home's contingency planning arrangements, an additional two care staff have been employed since the last inspection. This has reduced the need to rely on unfamiliar staff to cover sickness and other staff absences and provides continuity of care for care receivers.

Recruitment records for three staff members recruited into different roles since the last inspection were reviewed. These demonstrated that safe recruitment practices in line with the Standards had been followed, with the necessary pre-employment checks completed before staff commenced their duties. The Registered Manager is involved in all aspects of the recruitment and selection of staff. Ongoing criminal record checks are undertaken every three years as required by the Standards. Samples of these records were seen during the inspection which confirmed compliance with this requirement.

Is the service effective and responsive?

Care, treatment, and support achieves good outcomes, promotes a good quality of life and is based on the best available evidence.

Care receivers, their families, the records and discussions with the management team and care staff show that care receivers generally experience exceptionally positive outcomes and benefit from a home that is person centred, responsive and focused on promoting wellbeing and quality of life. Care receivers are treated with dignity and respect and are encouraged to express choice, maintain independence and receive support that meets their individual needs. Records reviewed and discussions with relatives confirmed that, where appropriate, they are actively involved in decisions and are kept up to date and their family member's health and any changes to their care and support needs.

Samples of care plans, risk assessments and other care records were reviewed on the electronic care management system. The Provider had arranged appropriate sign in access for the Regulation Officer, enabling records to be viewed effectively.

The care plans were highly personalised, comprehensive and clearly showed that staff had taken the time and effort to develop a thorough understanding of each care receiver as an individual. Records contained detailed information about personal preferences, routines, interests and choices, with some reflecting very specific individual preferences which were meaningful to the individual and respected by staff. The quality and level of personalisation within the care records is considered a significant strength of the home and an example of good practice. Additionally, the information recorded reflected the experiences described by care receivers and their relatives during discussions with the Regulation Officer.

Care plans and risk assessments were regularly reviewed and reflected family involvement where appropriate. Life histories were recorded and discussions with staff confirmed they had a working knowledge of care receivers' backgrounds and family connections.

Care receivers are supported to maintain their health and well-being. Care needs are closely monitored, with plans updated to reflect any changes in health or support requirements. Short term care plans relating to specific conditions, changes in needs, or defined courses of treatments were in place in addition to the longer-term plans. The records showed that appropriate health professionals, including GP, ambulance services and others are contacted promptly to review and respond to changes in health needs. There was evidence of correspondence with a GP relating to the deterioration in a care receiver's health and subsequent decision to transfer them to hospital. This showed that appropriate medical advice had been sought.

The home recognises the limits of the personal care and support it can safely provide and, where nursing care becomes necessary, works in partnership with relevant professionals to ensure timely transfer to a more suitable care setting. One care receiver spoke positively about a transfer of another individual to nursing care, explaining that the decision had been made in the person's best interests to ensure they received the level of care and support they required.

The home's location within a village community and the localities within walking distance help to allow care receivers to remain and feel part of village life.

Opportunities to access the village amenities were viewed very positively by care receivers and their relatives, who repeatedly highlighted the benefit of social inclusion and overall wellbeing. The activities coordinator explained the benefits of walks into the village and along the seafront, explaining how these outings help care receivers remain active and enjoy familiar places.

Samples of care receiver satisfaction surveys demonstrated that overall, they are very satisfied with life in the home. The home is responsive to individual preferences and requests, for example, requests for additional Jersey royal potatoes was accommodated, and another care receiver was provided with a specific piece of furniture for their personal use. Relatives also spoke positively about the home's responsiveness, with one family member commenting that requests are consistently responded to positively.

Samples of written contracts and care fee invoices were clear, transparent, and easy to understand, providing care receivers and their representatives with information about the services provided and associated charges. The home also demonstrated flexibility in its financial arrangements, making provision to accommodate individual preferences regarding how payments were made, thereby supporting choice and convenience for care receivers and their families.

Is the service caring?

Care is respectful, compassionate, and dignified. Care meets people's unique needs.

Feedback from care receivers and their families was overwhelmingly positive about the care, support, and quality of life experienced at the home. They consistently described the home as supportive, caring and very homely.

The following comments were provided to the Regulation Officer and provide examples of their experiences;

"It's welcoming, homely and reassuring. There's always a warm greeting from the staff when they answer the door, and its lovely seeing familiar faces. Emails from the manager are answered promptly and any concerns are acted upon quickly. I'm always kept informed of when the Dr has been called and the outcome.

Xxx associates the home as their comfortable and safe space. The bedroom is always clean and tidy. I'm reassured Xxx is safe, happy and receiving good care" (From a relative).

"Xxx is happy with her care and doesn't feel anything needs changing. The staff are very good, and we have observed the staff to be confident and reassuring when helping Xxx to move around the home. Xxx has developed good relationships with all staff members, and they are all friendly and happy, caring and kind. The home is run efficiently, and they are very responsive to any questions or requests we have. The home is immaculate and the housekeeping staff do a great job. The home offers an excellent service where the residents feel at home and very well cared for" (From a relative).

"I'm very impressed with them, Xxx loves the staff and can have a laugh with them. Since being in the home Xxx health has improved greatly. The medication is on time and always there. The bed sheets are always changed, and the staff really take their time and look after Xxx well. The Manager and Provider are great, anything I ask for is provided the next day" (From a relative).

"The staff were so friendly when I was looking around, and I know they've been there a long time, so I thought that was a good sign. The process of helping Xxx move into the home was very stressful, but the staff reassured me and knew exactly what to say and the management were reassuring. The home has a family feel, the staff are so caring, they're consistent and brilliant. They always ring me and give me an update and if I have any queries or concerns, they always have time to talk, and they never let me feel like I'm an inconvenience. The culture in the home is very relaxed, and they always support families too. They know Xxx on an individual basis, and I wouldn't want to change anything" (From a relative).

“I’ve got no worries here, you’re really looked after well, the gardens are lovely and I sometimes hear people shouting for help and I hear the staff go in and check on them, and they do always go and check. The food is alright; they always ask what you want” (from a care receiver).

“It’s wonderful and the level of care is second to none. The staff are very kind and friendly. My room is kept lovely and the staff are accommodating; nothing is too much trouble. If you’re worried about something you can go to anyone, but there’s no need to” (from a care receiver).

“It’s a great place; there’s no rules and it’s not regimented. You can do what you want, the staff are fun and we always have a laugh. It’s a homely home, my daughter found it for me, and it was the best thing she did” (from a care receiver).

“It’s lovely and I’m very happy here. I couldn’t ask for more. I’m well cared for and the staff are caring and kind. They help you with whatever you need. We meet for coffee in the garden and I like it as everyone knows everyone, and I feel like you can truly be yourself” (from a care receiver).

Some relatives, during conversations, highlighted a few areas they felt could be enhanced, including more seated exercises, increasing the variety of vegetables provided, and encouraging greater engagement from the Chef with care receivers during menu planning. This feedback was communicated to the Registered Manager, who received it positively and agreed to review these suggestions and explore potential improvements.

Menu samples were reviewed which showed that; a range of main cooked meals and lighter meal options are available, with alternatives offered to meet individual preferences. The Chef advised the Regulation Officer that any special dietary requirements are incorporated into care planning to ensure care receivers’ needs are appropriately met. During the inspection phase the weather was particularly hot, and ice creams and cool drinks were provided.

The home provides a varied programme of social activities and engagements which is displayed in the hallway.

The activities coordinator works flexible hours to include evenings to support a wider range of social outings, and examples of outings included walks around the village, coffee mornings, drives out and visits to garden centres. Plans for a few forthcoming social events were shared, which included plans to go to the French market.

The Regulation Officer observed a relaxed and welcoming atmosphere throughout the home on all three visits. Care receivers were seen socialising with staff, spending time in their bedrooms or indoor lounges, and gardens, and enjoying age-appropriate music and television programmes with subtitles enabled. Family members were observed coming and going, contributing to the homely environment, while staff remained visible and offered support where necessary. Care receivers appeared relaxed and comfortable, with those spoken to expressing satisfaction with the home.

Samples of care receivers' bedrooms were reviewed which were found to be personalised and reflective of individual preferences, with photographs, ornaments, and other personal belongings displayed throughout. Care receivers confirmed they were able to personalise their rooms as they wished. The standard of cleanliness and pride taken in the bedrooms demonstrated the home's commitment to valuing care receiver dignity.

Is the service well led?

The leadership, management and governance of the organisation assures delivery of high-quality care, supports learning and innovation, and promotes an open and fair culture.

Discussions with the Registered Manager, Provider and Senior Manager confirmed they have a good level of oversight and have full involvement in the home's day to day operations. The leadership and management arrangements promote a culture of openness and inclusion which contributes to positive experiences for care receivers and supports them to feel heard, respected and involved in decisions about their care.

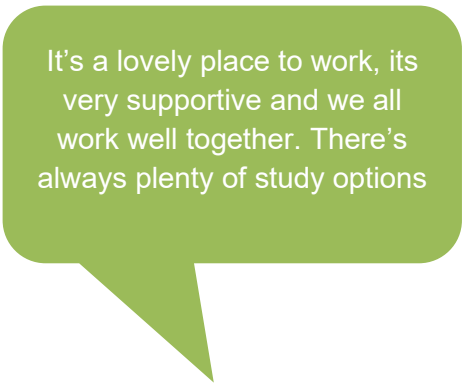
Feedback from care receivers and their relatives confirmed that they knew the Registered Manager and Provider and found them approachable and receptive when seeking support, discussing any concerns or matters relating to care.

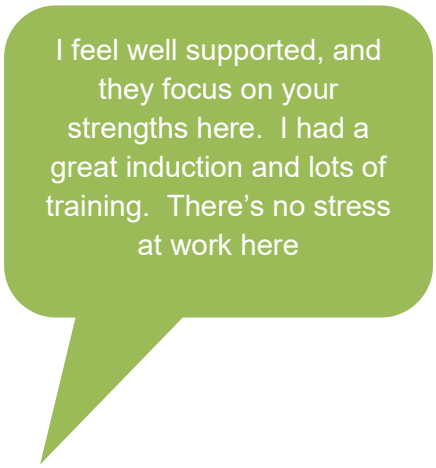
Samples of staff records showed that a structured induction is in place for all staff, which is tailored to their role and supported by competency assessments. Records reviewed confirmed that Standards relating to supervision, appraisal and probationary reviews are met. The Provider also meets with staff on a one-to-one basis to provide opportunities for them to share their views and feedback. A positive example was provided of how a staff member raised their personal development goals, which the Provider supported and responded to positively.

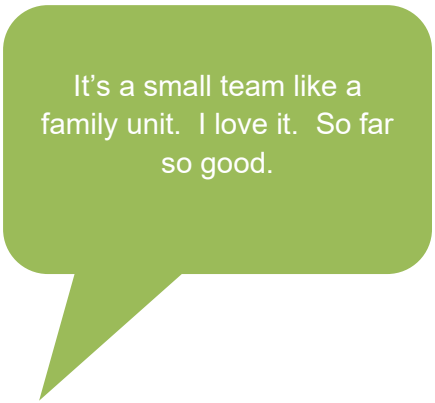
The Provider had also developed a comprehensive business continuity and contingency plan, which considered potential emergency situations that may impact the home's operation. This was reviewed which demonstrated a proactive approach to ensuring the continued provision of care and support in the event of unforeseen circumstances.

Staff feedback was positive, with staff reporting they feel valued and happy working in the home. There is a clear focus on staff development and retention. A few staff have worked in the home for many years' and there is little staff turnover. Staff are supported to develop in their roles and achieve vocational and managerial qualifications. They are also encouraged to take on additional responsibilities where appropriate, supporting professional and personal development.

When asked about the home staff said:







Samples of training records and certificates were reviewed which showed that there is a clear commitment to staff training and development, with evidence that staff are supported to develop their knowledge and skills and progress within their roles. The standards relating to ongoing training and the proportion of staff with vocational qualifications are met. Training and development plans are in place to support staff to complete both Level 2 and 3 vocational qualifications in health and social care. Emphasis is placed on the provision of face-to-face interactive training for staff.

Strong governance arrangements are in place, with routine audits completed in respect of medication, care receiver satisfaction, record keeping, nutrition, and monthly reviews of the home's compliance in meeting the standards. Samples of monthly reports showed that any issues are promptly identified and addressed. The management team maintains effect oversight through regular conversations with care receivers, their relatives, review of records, and monitoring of the environment.

The Provider has demonstrated a commitment to continuously improving the home and has plans in place to enhance the environment, including replacing the lift, installing solar panels and replacing the garden gazebo for the benefit of care receivers. The home has also displayed its registration with the Commission, in accordance with regulatory requirements.

IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection, therefore; an improvement plan is not required.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of the Care Commission during the course of this inspection. The findings contained within this report do not exempt the service from their responsibility for maintaining compliance with legislation, Standards and best practice.

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